|                                                                                                                                                                                                                                            |                                  |          | ,                               | Sioux              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|----------|---------------------------------|--------------------|
| FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE                                                                                                                                                                                 | GE                               |          | FORM<br>DR-2                    | DISCLOSURE         |
| COMMITTEE NAME (Must be same as on Stalement of Orga                                                                                                                                                                                       |                                  | _        | ev. 07/2004)                    | REPORT             |
| 500mm                                                                                                                                                                                                                                      |                                  | Fo       | r Office Use O                  | nly                |
| Friends of Northwest Iowa Community                                                                                                                                                                                                        | College                          | Co       | mm.#                            | 21241              |
| IMPORTANT: Indicate by # type of committee you are reporting for:                                                                                                                                                                          |                                  |          |                                 |                    |
| (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Candi Political Subdivision Candidate (8) County PAC (9) City PAC (10) Subdivision PAC (11) Local Ballot Issue | idate (7)School Board or Other   | Co       | mputer                          |                    |
| CANDIDATE COMMITTEES ONLY:                                                                                                                                                                                                                 |                                  |          |                                 |                    |
| Candidate Name                                                                                                                                                                                                                             | Political Party (if applicable)  |          | e reports are<br>sible civil an |                    |
| Office Sought                                                                                                                                                                                                                              | District (if Senate or House)    | , ,      | alties.                         | u chimna           |
| 2                                                                                                                                                                                                                                          | . 97                             | ╛        |                                 |                    |
| alethea Dtubbe                                                                                                                                                                                                                             | 712-324-5061                     |          |                                 | 12-7-04            |
| SIGNATURE OF PERSON FILING REPORT                                                                                                                                                                                                          | TELEPHONE                        |          | DATE S                          | IGNED              |
| I AM FILING A December 7, 2004 (report date)                                                                                                                                                                                               | _ REPORT FOR (1) ELECTION /      |          | -ELECTION \                     | YEAR.              |
| CHECK IF AMENDMENT TO REPORT DATED                                                                                                                                                                                                         | Lo                               | cal Comi | nittees, enter D                | ate of Election    |
|                                                                                                                                                                                                                                            | S                                |          | ber 14,                         |                    |
| Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.                                                                                                                 |                                  |          | ion is held                     | s, enter County in |
| STATEMENT                                                                                                                                                                                                                                  | OF CASH ON HAND                  |          |                                 |                    |
| CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the confidence of the last reporting period or must be zero if this is fin                                                           | ash on hand at the end           | <b>S</b> | 60.00                           | )                  |
| ADD TOTAL MONEY TAKEN IN THIS PERIOD                                                                                                                                                                                                       |                                  |          |                                 |                    |
| Schedule A: Cash Contributions total (Attach Schedu                                                                                                                                                                                        | ile A) (*also see in-kind below) |          | 60.00                           | )                  |
| Schedule F: Loans Received total (Attach Schedule F                                                                                                                                                                                        | F)                               |          | 0.00                            | )                  |
| Schedule H: Total Sales of Campaign Property (Attac                                                                                                                                                                                        | ch Schedule H)                   |          | 0.00                            | )                  |
| (Schedule H applies to Candidates' Comm                                                                                                                                                                                                    | nittees Only)                    |          |                                 |                    |
|                                                                                                                                                                                                                                            | SUB-TOTAL                        | \$       | 60.00                           | )                  |
| SUBTRACT TOTAL MONEY SPENT THIS PERIOD                                                                                                                                                                                                     |                                  | •        |                                 | <u> </u>           |
| Schedule B: Expenditures total (Attach Schedule B) (                                                                                                                                                                                       | also see debts and loans below   | )        | 60.00                           | )                  |
| Schedule F: Loan Repayments total (Attach Schedule                                                                                                                                                                                         | e F)                             |          | 0.00                            | )                  |
| CASH ON HAND at the end of this reporting period (if final reporting                                                                                                                                                                       | ort balance must                 |          |                                 |                    |
| be zero) (Attach DR-3)                                                                                                                                                                                                                     |                                  | \$ =     | 0.00                            | )                  |
| **UNPAID BILLS (From Schedule D - Attach Schedule D)                                                                                                                                                                                       |                                  | S        | 0.00                            | )                  |
| *IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched                                                                                                                                                                                     |                                  |          | 0.00                            |                    |
| **OUTSTANDING LOANS (From Schedule F - Attach Schedul                                                                                                                                                                                      |                                  | -        |                                 |                    |
| CANDIDATE COMMITTEES ONLY:                                                                                                                                                                                                                 |                                  | •        |                                 |                    |
| CONSULTANT BREAKDOWN (Schedule G Attached?)                                                                                                                                                                                                |                                  |          | YE                              | s <u></u> ио       |
| VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attack                                                                                                                                                                                       | ch Schedule H)                   | \$ .     |                                 |                    |

FOR INSTRUCTIONS, SEE BACK OF FORM

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|                                          | 74. ii |
|                                          |        |

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE, A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| SCHEDULE<br>B<br>(Rev. 07/03) | MONETARY<br>EXPENDITURES |
|-------------------------------|--------------------------|
|                               | CK THIS BOX IF           |

| COMMITTEE NAME | (Must be | same as on | Statement | of Organization) |
|----------------|----------|------------|-----------|------------------|
|----------------|----------|------------|-----------|------------------|

Friends of Northwest Iowa Community College

| DATE<br>EXPENDED<br>(MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM<br>EXPENDITURE<br>(Disbursement) WAS MADE               | PURPOSE<br>(DESCRIBE TRANSACTION)     | AMOUNT<br>EXPENDED |
|--------------------------------|----------------------------------------------------------|----------------------------------------------------------------------------------|---------------------------------------|--------------------|
| 10-20-04                       | ID#<br>CK# 1.023                                         | Northwest Iowa Community<br>College<br>603 West Park Street<br>Sheldon, IA 51201 | Wages & fringe benefits.              | \$ 60.00           |
|                                | ID#<br>CK#                                               |                                                                                  | mages of 111mgs benefited.            |                    |
|                                | ID#                                                      |                                                                                  |                                       | 1                  |
| ı                              | CK#                                                      |                                                                                  |                                       |                    |
|                                | ID#                                                      |                                                                                  |                                       |                    |
|                                | CK#                                                      |                                                                                  |                                       |                    |
|                                | ID#<br>CK#                                               |                                                                                  |                                       |                    |
|                                | ID#                                                      |                                                                                  |                                       |                    |
|                                | CK#                                                      |                                                                                  |                                       |                    |
|                                | ID#                                                      |                                                                                  |                                       |                    |
|                                | CK#                                                      |                                                                                  |                                       |                    |
|                                | ID#                                                      |                                                                                  |                                       |                    |
|                                | CK#                                                      |                                                                                  |                                       |                    |
|                                |                                                          | , <del></del>                                                                    | SUB-TOTAL                             | \$ 60.00           |
|                                |                                                          |                                                                                  | TOTAL (if last page of this schedule) | \$ 60.00           |

| THIS DOV ADDITION | ~~ | A    |        |        |           |
|-------------------|----|------|--------|--------|-----------|
| THIS BOX APPLIES  | 10 | CANL | IDALES | COMMIT | TEES ONLY |

Furchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 66A.402(3)(i).)

| Page | 1 | af | 1 |  |
|------|---|----|---|--|
|      |   |    |   |  |